

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005103

Entity Name: DOWNTOWN VISION, INC.

Current Principal Place of Business:

214 N. HOGAN ST., #120
JACKSONVILLE, FL 32202

Current Mailing Address:

214 N. HOGAN ST., #120
JACKSONVILLE, FL 32202

FEI Number: 59-3473060

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GORDON, JACOB A
214 N. HOGAN ST., #120
JACKSONVILLE, FL 32202 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JACOB A. GORDON

01/25/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name PRESCOTT, BILL
Address 4417 BEACH BOULEVARD
SUITE 302
City-State-Zip: JACKSONVILLE FL 32202

Title CEO
Name GORDON, JACOB A
Address 214 N. HOGAN ST., #120
City-State-Zip: JACKSONVILLE FL 32202

Title VC
Name BARAKAT, OLIVER
Address 225 WATER STREET
City-State-Zip: JACKSONVILLE FL 32202

Title TREASURER
Name LOWE, JANICE
Address 2 INDEPENDENT DRIVE
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name ADAMS, BILL
Address 225 WATER STREET
SUITE 1750
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name ALLIGRETTI, TONY
Address 300 W WATER STREET
SUITE 201
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name CROSBY, STEPHEN A
Address 6737 SOUTHPOINT DRIVE S.
SUITE 100
City-State-Zip: JACKSONVILLE FL 32216

Title CHAIRMAN
Name DURAND-STUEBBEN, TERESA
Address 1478 RIVERPLACE BLVD
#204
City-State-Zip: JACKSONVILLE FL 32207

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JACOB A. GORDON

CEO

01/25/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name JENKS, TRACI
Address 121 W FORSYTH STREET
SUITE 900
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name REAM, JOHN
Address 131 EAST BAY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name WALLACE, AUNDRA
Address 117 W. DUVAL STREET
SUITE 310
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name BLOUNT, JOHN
Address 124 W ASHLEY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name BOYER, LORI
Address 117 W DUVAL STREET
SUITE 425
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name JUDGE, JAMES
Address 501 E. BAY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name ASHOURIAN, ZACK J
Address 7880 GATE PARKWAY
SUITE 300
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name MCINTYRE, RYAN
Address 4949 BLANDING BLVD
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name MCCORMACK, VINCE
Address 5 W FORSYTH STREET
SUITE 100
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name SAISSSELIN, NUMA
Address 128 EAST FORSYTH STREET
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name TUTEN, DON
Address 501 E. BAY STREET
City-State-Zip: JACKSONVILLE FL 32205

Title DIRECTOR
Name FORD, NATHANIEL P SR.
Address 121 W FORSYTH STREET
SUITE 200
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name HANAK, JAN X
Address ONE INDEPENDENT DRIVE
SUITE 114
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name HIGGINS, ERIK
Address 225 WATER STREET
SUITE 2200
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name STEWART, KERRI
Address 21 W CHURCH STREET, T16
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name SOUTHWORTH, DAWN
Address 245 WATER STREET
City-State-Zip: JACKSONVILLE FL 32202